Attorney's Do	cket No PATENT
CON	MBINED DECLARATION AND POWER OF ATTORNEY
(ORIGIN	NAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION OR C-I-P)
As a below name	ed inventor, I hereby declare that:
	TYPE OF DECLARATION
This declaration	is of the following type:
	(check one applicable item below)
x original.	
design.	
suppleme	ntal.
NOTE: If the decle part applic	aration is for an International Application being filed as a divisional, continuation or continuation-in- ation, do <u>not</u> check next item; check appropriate one of last three items.
national s	tage of PCT.
NOTE: If one of CONTINU	the following 3 items apply, then complete and also attach ADDED PAGES FOR DIVISIONAL, ATION OR C-I-P.
divisional	
continuat	ion.
continuati	ion-in-part (C-I-P).
	INVENTORSHIP IDENTIFICATION
WARNING:	f the inventors are each not the inventors of all the claims, an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.
My residence, po am the original,	ost office address and citizenship are as stated below, next to my name. I believe that I first and sole inventor (if only one name is listed below) or an original, first and joint

inventor (if plural names are listed below) of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

<u> </u>	Method in a receiver an	id a receiver	

SPECIFICATION IDENTIFICATION

the specification of which:
(complete(a), (b), or(c))
(a) x is attached hereto
(b) was filed on as Serial No. 0/ or Express Mail No., As Serial No. not yet known
and was amended on (if applicable).
NOTE: Amendments filed after the original papers are deposited with the PTO that contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67.
(c) was described and claimed in PCT International Application No.
, filed on and as amended under PCT Article 19 on (if any).
amended under PCT Article 19 on (if any).
ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.
I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56,
(also check the following items, if desired)
x and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, and in compliance with this duty, there is attached an information disclosure statement, in accordance with 37 CFR 1.98.
PRIORITY CLAIM (35 U.S.C § 119(a)–(d))
I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)–(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.
(complete (d) or (e)
(d) no such applications have been filed.
(e) x such applications have been filed as follows.
NOTE: where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter the details below and make the priority claim.

PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119(a)–(d)

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY O	
Finland	20000819	6 April 2000	x YES	NO 🔲
			YES	NO 🗌
			YES	NO 🗌
			YES	NO 🗌
			YES	NO 🗌
I hereby claim the benefit under Title 35, United Staprovisional application(s) listed below: PROVISIONAL APPLICATION NUMBER		FILING DATE		
	ATION NUMBER	FILI	NG DATE	
		-		
		,—,		
CLAIM F	OR BENEFIT OF EARI UNDER 35		ATION(S)	
ADDED I	n for the benefit of any sucl PAGES TO COMBINED VISIONAL, CONTINUA	DECLARATION AND I	POWER OF A	TTORNEY

APPLICATION

ALL FOREIGN APPLICATION(S), *IF ANY*, FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

NOTE: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage, or (2) a continuation, divisional, or continuation-in-part, then also complete ADDED PAGES TO COMBINED DECLARATION AND POWER OF

ATTORNEY FOR DIVISIONAL, CONTINUATION OR C-I-P APPLICATION for benefit of the prior U.S. or PCT

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

(list name and registration number)

Clarence A. Green (Reg. No. 24,622) Mark F. Harrington (Reg. No. 31,686) Thomas P. Dowd (Reg. No. 24,586)

application(s) under 35 U.S.C. § 120.

(check the following item, if applicable)

Attached, as part of this declaration and power of attorney, is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

DIRECT TELEPHONE CALLS TO:

(Name and telephone number)

Clarence A. Green (203) 250–1800

Clarence A. Green Perman & Green, LLP 425 Post Road Fairfield, CT 06430

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

NOTE:

Carefully indicate the family (or last) name, as it should appear on the filing receipt and all other documents.

Full name of sole	e or first inventor	
David		AKOPIAN
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
Inventor's signature	D- Akopian	
Date	8 February 2001 Country of Citizenship	Armenia
Residence	Ahvenisraitti 24 C 32, FIN-33720 Tampere, Finland	
Post Office Address	same as above	
		
	ond joint inventor, if any	
Ilkka		KONTOLA
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
	Ilka Fantola	
Inventor's signature	Illa for 6 a	
Date	8 February 2001 Country of Citizenship	Finland
Residence	Vanha Vaasantie 33, FIN-39160 Julkujärvi, Finland	
Post Office Address	same as above	
	•	
	d joint inventor, if any	
Harri		VALIO
(GIVEN NAME)	MIDDLE INITIAL OR NAME	FAMILY (OR LAST NAME)
Inventor's signature	m'Un	
Date	8 February 2001 Country of Citizenship	Finland
Residence	Rantamäentie 8, FIN-37550 Lempäälä, Finland	
Post Office Address	same as above	

then end this Declaration with this page and check the following item)

This declaration ends with this page.

SIGNATURE(S)

NOTE:

Carefully indicate the family (or last) name, as it should appear on the filing receipt and all other documents.

Full name of 4	th joint inventor, i	if any			
Seppo				TURUNEN	
(GIVEN NAME)		MIDDLE IN	ITIAL OR NAME	FAMILY (OR LAST NAME)	
Inventor's signature	Sessel)—			
Date	8 February	y 2001	Country of Citizenship	Finland	_
Residence	Pinninkatu 32, F	Pinninkatu 32, FIN-33100 Tampere, Finland			
Post Office Address	same as above				
Full name of	joint inventor, if	any			
(GIVEN NAME)		MIDDLE IN	NITIAL OR NAME	FAMILY (OR LAST NAME)	
Inventor's signature					_
Date			Country of Citizenship		
Residence					
Post Office Address					
Full name of	joint inventor, if	any			
(GIVEN NAME)		MIDDLE II	NITIAL OR NAME	FAMILY (OR LAST NAME)	
Inventor's signature					
Date			Country of Citizenship		
Residence					
Post Office Address					